24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)			PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)			FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund			
			C C00448696
		M	M / D D / Y Y Y Y
Check If 24-hour report X 48-hour report	New report Amends repo		
Full Name (Last, First, Middle Initial) of Payee		Date	
Senate Conservatives Fund		M	M / D D / Y Y Y Y
Mailing Address PO Box 388			01 2014
PO Box 388		Amoun	.+
Cha	to 7in Code	Amoun	ıı
City Sta Alexandria VA	•	11.	128.75
	22313-3404		tion ID : EA74ECD77478E48E19B7
Purpose of Expenditure IE-McDaniel-Online Processing	Category/	Office Sough	
- Instance Chance Processing	Туре		X Senate District:
Name of Federal Candidate Supported or Opposed by E	xpenditure:		President
Christopher Brian Mcdaniel		Check One:	Support Oppose
Calendar Year-To-Date Per Election	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		t For: Primary General
for Office Sought	128.75	2014 Oth	ner (specify)
Full Name (Last, First, Middle Initial) of Payee		Date	
ASG Marketing		M	M / D D / Y Y Y Y
Malling Address			01 07 2014
Mailing Address 2020 Pennsylvania Ave NW		Amour	nt
City Sta	te Zip Code		
Washington DC	•		10403.00
Purpose of Expenditure		Office Sough	ction ID : E593CD44C222A473680F ht: House State: MS
IE-McDaniel-Email List Rental	Category/ Type	Ollioc Cough	Consts
			President District:
Name of Federal Candidate Supported or Opposed by E	expenditure:	Check One:	Support Oppose
Christopher Brian Mcdaniel		Official Offic.	Сиррогт
Calendar Year-To-Date Per Election	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		t For: 🔀 Primary 🔲 General
for Office Sought	10531.75	2014 Oth	ner (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			10531.75
			7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures			
(,,			7 7 4
(c) TOTAL Independent Expenditures			
(c) TOTAL Independent Experiations		 	10531.75
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert			
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
party committee, any pointed party committee or its agen			
Paul Kilgore		M = M /	D D / Y Y Y Y
	[Electronically Filed] Date	01	07 2014
Signature			